# ALABAMA DEPARTMENT OF ECONOMIC AND COMMUNITY AFFAIRS ENERGY, WEATHERIZATION AND TECHNOLOGY DIVISION

# STATE ENERGY PROGRAM – PUBLIC INFORMATION CAMPAIGN REQUEST FOR PROPOSALS

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#### REQUEST FOR PROPOSALS - INSTRUCTIONS

#### 1. Introduction

The Alabama Department of Economic and Community Affairs (ADECA), Energy, Weatherization and Technology Division (hereinafter called "EWT") manages the State Energy Program (SEP) for Alabama by authority of the U.S. Department of Energy. Each year EWT develops and implements an energy efficiency plan that will reduce energy demand in Alabama. As part of this plan, EWT is soliciting proposals for a statewide media campaign to increase public awareness and comprehension of energy efficiency and/or renewable energy topics and methods.

Maximum Funds Available:\$80,000

#### 2. Objective

The EWT Division seeks proposals to design and implement a media campaign intended to increase public awareness and comprehension of energy efficiency and/or renewable energy topics and methods. Topical areas addressed may include any of the following or a combination thereof: Residential energy efficiency, residential energy-efficient building codes and practices, renewable energy, alternative transportation fuels, public/private transportation efficiency, and performance contracting. Interested parties seeking additional information about EWT programs may visit the agency website at <a href="http://www.adeca.alabama.gov/EWT/default.aspx">http://www.adeca.alabama.gov/EWT/default.aspx</a>.

#### 3. Specific Requirements

Information dissemination should target the general public in Alabama and may include one or any combination of a variety of media tools including, but not limited to public service announcements, electronic billboards, cable television packages or printed periodicals. Proposals will be rated on innovation, creativity, simplicity of message, and cost effectiveness in reaching the broadest audience possible. Additional consideration will be given to proposals demonstrating the development of an effective message that incorporates a variety of subject matter areas. Stand-alone options for multi-media or multi-subject proposals with associated costs should be presented. See additional requirements in Section 7, Proposal Contents.

#### **Due Date and Delivery Address**

All proposals must be received by 4:30 p.m. on Friday, June 29, 2007 at:

By Mail: ADECA – EWT P.O. Box 5690 Montgomery, AL 36103-5690 By Courier: ADECA-EWT, Mailroom 404 401 Adams Avenue Montgomery, AL 36104 (334) 242-5292

#### 5. Right to Reject

EWT reserves the right to reject any and all proposals submitted and to request additional information from all Offerers. EWT reserves the right to award a contract on an "all or none" basis or to award a separate contract or no contract for each work element. Any contract award will be made to the organization which, in the opinion of EWT, is determined to be the best qualified and whose proposal best meets the needs of EWT. EWT reserves the right to negotiate with any Offerer(s). EWT reserves the right to reallocate funding for subject areas as deemed necessary.

#### 6. Letter of Transmittal

Each proposal must be submitted with a letter of transmittal which must include the following:

- A. A brief statement of the work to be performed.
- B. A statement assuring that the person signing the letter is authorized to bind the offer presented in the letter and accompanying proposal.

#### 7. Proposal Contents

The Offerer must submit one copy of the proposal with the following items:

#### A. Title Page

Title of project, name of Offerer's organization, local address, telephone number, email address, name of contact person(s), date submitted.

#### B. <u>Proposal Narrative</u>

The proposal should not exceed 10 pages in length. Forms are not a part of the 10-page limit. The Offerer shall submit a written narrative outlining each of the following:

#### **Project Strategy**

 Provide a detailed description of the proposed media campaign including subject matter areas proposed for development, type(s) of media proposed with associated cost estimates, strategies for reaching maximum target audience including estimated results, how cost effectiveness is maximized, and estimated frequency of distribution or broadcast based on cost estimates presented. Stand-alone options for multi-media or multi-subject proposals should be presented.

#### Scope of Work

- Proposed tasks, scheduled milestones, task deliverables, timeline for completion of task, and estimated budget amount for each task. Note: the proposed performance period for this contract will be October 1, 2007 through September 30, 2008.
- Include method for measuring project effectiveness

#### C. Proposed Budget Summary

Your budget should be submitted in two parts:

- 1. Prepare a Budget using Attachment "A." Budgets should be broken down into specific cost categories; e.g., personnel, fringe benefits, supplies and materials, travel, contractual, other, indirect costs. The cost of preparing the Proposal shall be borne by the Offerer.
- 2. Prepare a Budget Narrative using Attachment "B".

#### D. Offerer's Background and Experience

- 1. Briefly describe similar projects which your organization has developed and implemented.
- 2. Give a brief description of the qualifications and experience of each staff member assigned to this project.

#### **Evaluation**

The Offerers with the highest technical score will be the primary ones considered for a contract. EWT shall evaluate each proposal according to the Proposal Evaluation Method, as follows:

l.	<u>Tec</u>	chnical Criteria (80 possible points)	Maximum Points Possible
	A.	Effective design of media campaign with detailed description of each work element to be accomplished as outlined under Scope of Work. Task elements should be quantifiable, clearly defined, and measurable; clearly stated goals and objectives. Innovative, creative design. Can proposal effectively convey multi-topic message?	<u>20</u>
	B.	Potential impact of media campaign. Realistic estimate of audience to be reached.	<u>20</u>
	C.	Description of method(s) for measuring program effectiveness.	<u>15</u>
	D.	Proposed plan to complete the project in a timely manner. Detailed description of deliverables and time lines for task completion.	<u>15</u>
	E.	Qualifications and experience of Offerer.	<u>10</u>
II.	Cos	st Criteria (20 possible points)	
	A.	Cost effectiveness of proposal. Budget must be appropriate for proposed project. Budget shall provide a cost breakdown for each proposed task. Multi-subject or multi-media proposals should include separate options and associated costs.	<u>20</u>
		Total Maximum Points	<u>100</u>

#### 9. Contractual Arrangements

EWT intends to issue a contract to begin no later than October 1, 2007, and terminate September 30, 2008, for an amount not to exceed that which is negotiated between the selected Offerer and the Division. Payments shall be made on a cost-reimbursement basis over the course of the contract.

#### 10. Required Disclosure Statement

Alabama Act 2001-955 requires the Disclosure Statement (Attachment "D") to be completed and filed with all proposals, bids, contracts, or grant proposals to the State of Alabama in excess of \$5,000. Complete all lines as indicated. If an item does not apply, denote N/A (not applicable). If you cannot include required information in the space provided, attach additional sheets as necessary. The form must be signed, dated, and notarized.

#### 11. Proprietary Information

The information contained in the proposals will be public information unless specific requests are made to keep specific information confidential. If a proposal contains any information that the Offerer does not wish to have disclosed to the public or used by EWT for any purpose other than evaluation of the offer, each sheet of such information must be clearly marked "proprietary." This information will be kept confidential, subject to the laws of the State of Alabama. Proposals and supporting materials submitted shall become the property of EWT.

#### 12. Late Proposals

Proposals submitted after the due date will not be considered. EWT reserves the right to reject any incomplete proposals without review.

#### 13. Questions

Questions pertaining to this RFP may be submitted through June 22 to Kathy Hornsby, at kathy.hornsby@adeca.alabama.gov or via fax at (334) 242-0552.

This 'Request for Proposals' does not indicate acceptance or approval of any proposal in response to this request. No grant or contract payment can be made until a fully executed document is in place. Therefore, proposals selected for funding shall not perform any work prior to an executed agreement.

#### YOUR PROPOSAL MUST INCLUDE THE FOLLOWING:

- Letter of Transmittal (see section 6)
- > Title Page (see section 7A)
- Proposal Narrative (including a time table for each activity) (see section 7B)
- ➤ Budget (Attachments "A" and "B") (see section 7C)
- Offerer's Background and Experience (see section 7D)
- Proposer Information Form (Attachment "C")
- Completed, signed and notarized Disclosure Statement (Attachment "D") (see section 10)
- Certifications Form (Attachment "E")
- ➤ IRS Form W-9 (Attachment "F")
- Immigration Status (Attachment "G")

FINAL NOTE: Please keep a complete copy of your proposal (including a copy of all completed and signed attachments).

## **Attachment A**

## **PROJECT BUDGET**

<u>Cost Categories</u>		Project Amount
1.	PERSONNEL	\$
2.	FRINGE BENEFITS	\$
3.	SUPPLIES & MATERIALS	\$
4.	CONTRACTUAL	\$
5.	TRAVEL	\$
6.	EQUIPMENT	\$
7.	OTHER	\$
8.	INDIRECT COST	\$
TC	DTAL	<b>\$</b>

#### PROJECT BUDGET DEFINITIONS

- (1) Total project personnel costs.
- (2) Total cost of fringe benefits for personnel.
- (3) Total cost of supplies. Includes general office supplies, postage charges and freight charges.
- (4) Contractual services. Note that written subcontracts must be obtained to engage these services.
- (5) Total cost of travel. ADECA-EWT Division will reimburse the written travel rate adopted for your agency or the state of Alabama travel rate, whichever is more restrictive.
- (6) Total cost of equipment purchased for project. (Equipment can be leased or rented; however, these costs should be listed under the "Other" category.)
- (7) Total 'Other' costs. Includes copying, printing, graphics, telephone, rent/lease, maintenance, workshop fees, computer service/time, etc.
- (8) Indirect. ADECA-EWT Division will reimburse indirect costs up to 25% of the Modified Total Direct Costs (MTDC), items 1-7, except 6 (ADECA-EWT DOES NOT REIMBURSE INDIRECT COSTS ON EQUIPMENT PURCHASES).

#### Attachment B

#### PROJECT BUDGET NARRATIVE

Please provide the following information to explain the estimated costs for the project budget. Attach additional sheets as needed.

- (1) **Personnel**: List program personnel by function (e.g., program coordinator, engineer, secretary, student aide, etc.) Show the salary of each person and the percentage of time that each person will spend on the project. (Example: Project Director, annual salary \$40,000, 75% of time to be spent on the project)
- (2) **Fringe**: If fringe benefits are estimated as a percentage of personnel costs, give percentage. List items included in fringe and % amount for each respective item included. (Example: Fringe rate is 25% of personnel cost as follows: FICA 7.65%, Retirement 6.77%, medical \$400/ month.)
- (3) **Supplies**: List estimated cost of supplies. Supplies include general office supplies, computer supplies, postage charges and freight charges.
- (4) **Contractual**: List categories of services to be contracted with outside agencies or for professional services. Note that written subcontracts must be obtained to engage these services.
- (5) **Travel**: ADECA-EWT Division will reimburse the written travel rate adopted for your agency or the State of Alabama travel rate, whichever is more restrictive. Attach a copy of your written travel rate adopted for your agency if you plan to use your rate. The State travel rate is as follows.

Overnight per diem is set at the following rate: \$75.00 per day

The single day meal allowances are set at the following:

- A \$11.25 meal allowance is allowed if a trip is from 6 to 12 hours duration.
- A \$30.00 meal allowance is allowed if a trip exceeds 12 hours duration but does not involve an overnight stay.
- If a person in travel status has been stationed at the same location for two consecutive months, the \$75.00 per diem is decreased to \$56.25.

The mileage rate paid to persons traveling in privately owned vehicles on official business is 48.5 cents per mile as of January 1, 2007. When calculating the amount to be reimbursed, all mileage listed on an expense account must be totaled and then multiplied by 48.5 cents, with odd amounts rounded to the nearest cent. (Example: 111 miles X \$.485 = \$53.835 = \$53.84)

- (6) **Equipment**: Provide a description of the equipment, cost, and reason why it is necessary to purchase the equipment. Equipment is defined as tangible, non-expendable property having a useful life of more than one year and an acquisition cost of \$500 or more per unit. (Note: leased or rented equipment should be listed under the "Other" category.)
- (7) **Other**: List other costs including: printing, graphics, telephone, rent/lease, maintenance, workshop fees, computer services, and advertising.
- (8) **Indirect**: ADECA-EWT Division will reimburse indirect costs up to 25% of the Modified Total Direct Costs (MTDC) items 1-7, except 6 (ADECA-EWT DOES NOT REIMBURSE INDIRECT COSTS ON EQUIPMENT PURCHASES). Attach a copy of your indirect cost rate agreement if you are showing indirect costs on your budget.

#### OFFEROR/PROPOSER/CONTRACTOR INFORMATION FORM

Gr	antee's/Contractor'	s Legal Name			
		City			State
		County			
	Fede	eral Employer Iden	tification No.		
	Grantee's Indirect C	ost Rate (if applicabl	e) (Must be negotiated with federal cognizar current rate or written plan.		t cost plan. Attach a copy of your
	<b>Project Director</b>	Mr./Mrs./Ms./Dr.	E' (N	M:111 T '' 1	I AN
			First Name	Middle Initial	Last Name
		Position/Title			FAX
		Mailing Address			
		Email Address	S		
	Asst. Proj Director	Mr./Mrs./Ms./Dr.			
	(only if Applicable)		First Name	Middle Initial	Last Name
		Position/Title		Phone	FAX
		Mailing Address			
		E:1 A 44			
		Email Address			
	Send Grant To:	Mr./Mrs./Ms./Dr.			
	(office to sign Grant)		First Name	Middle Initial	Last Name
		Position/Title		Phone	FAX
		Mailing Address			
		Email Address			
	Accountant	Mr./Mrs./Ms./Dr.			
	(contact for invoices)		First Name	Middle Initial	Last Name
		Position/Title		Phone	FAX
		Mailing Address		<del></del>	
		Č			
		Email Address			
	Mail Checks To:	Mr./Mrs./Ms./Dr.			
	(if different from Acct.)	111,1110,1110,211	First Name	Middle Initial	Last Name
		Position/Title		Phone	FAX
		Mailing Address			ΙΑΛ
		8			
		Email Address			
**STATE S	SENATOR (this loca	ation)			
**SIAIE I	REPRESENTATIV	E (this location)			
ORGANIZ	ZATION TYPE (	Check one which	applies)		
	overnment Agency		State Government Agency		vernment Agency
	umentality of Gov		Public (4-Year) University		-Year) University
	for Col./Tech. Sch		Private Jr. Col./Tech. School		or-Profit Company
Public Not	-For-Profit Agency	y	Private Not-For-Profit Agency	Private Inc	aividual

<sup>\*\*</sup> All Project Directors will receive a copy of the contract to be executed. This category is for organizations whose contract signing/maintaining officers are someone else or whose officers are located at a different address than the Project Director.



# State of Alabama

# **Disclosure Statement**

(Required by Act 2001-955)

ENTITY COMPLETING FORM		
ADDRESS		
CITY, STATE, ZIP		TELEPHONE NUMBER
STATE AGENCY/DEPARTMENT THAT WILL RECEIVE GOODS, SERVICES, OR IS RESPONS	SIBLE FOR GRANT AWARD	
ADDRESS		
CITY, STATE, ZIP		TELEPHONE NUMBER
This form is provided with:		
Contract Proposal Request for Proposa	I Invitation to Bid	Grant Proposal
Have you or any of your partners, divisions, or any related bus Agency/Department in the current or last fiscal year?  Yes  No	iness units previously perform	ed work or provided goods to any State
If yes, identify below the State Agency/Department that received vided, and the amount received for the provision of such goods	-	pe(s) of goods or services previously pro
STATE AGENCY/DEPARTMENT TYPE OF	GOODS/SERVICES	AMOUNT RECEIVED
Have you or any of your partners, divisions, or any related bus Agency/Department in the current or last fiscal year?  Yes No	iness units previously applied	and received any grants from any State
If yes, identify the State Agency/Department that awarded the g	rant, the date such grant was	awarded, and the amount of the grant.
STATE AGENCY/DEPARTMENT DATE G	RANT AWARDED	AMOUNT OF GRANT
1. List below the name(s) and address(es) of all public officials/pany of your employees have a family relationship and who mand the State Department/Agency for which the public office.	ay directly personally benefit f	inancially from the proposed transaction
NAME OF PUBLIC OFFICIAL/EMPLOYEE	ADDRESS	STATE DEPARTMENT/AGENCY

NAME OF FAMILY MEMBER	ADDRESS	NAME OF PUBLIC OFFICIAL PUBLIC EMPLOYEE	_/ STATE DEPARTMENT/ AGENCY WHERE EMPLOYED
=	nd/or their family members as the	cribe in detail below the direct financia result of the contract, proposal, reque	- · · · · · · · · · · · · · · · · · · ·
	yee as the result of the contract, p	ned by any public official, public emplo proposal, request for proposal, invitation	
List below the name(s) and a posal, invitation to bid, or gra	The state of the s	and/or lobbyists utilized to obtain the	contract, proposal, request for pro-
NAME OF PAID CONSULTANT/LO	BBYIST	ADDRESS	
to the best of my knowledg	e. I further understand that a civ	y that all statements on or attached vil penalty of ten percent (10%) of th correct or misleading information.	
Signature		Date	

2. List below the name(s) and address(es) of all family members of public officials/public employees with whom you, members of your immediate family, or any of your employees have a family relationship and who may directly personally benefit financially from the

Act 2001-955 requires the disclosure statement to be completed and filed with all proposals, bids, contracts, or grant proposals to the State of Alabama in excess of \$5,000.

#### DISCLOSURE STATEMENT INFORMATION AND INSTRUCTIONS

Alabama Act 2001-955 requires the Disclosure Statement to be completed and filed with all proposals, bids, contracts, or grant proposals to the State of Alabama in excess of \$5,000.

Entity completing form is your agency.

State agency responsible for grant award is ADECA, P.O. Box 5690, Montgomery, AL 36103-5690, phone (334) 242-5290.

Complete all lines as indicated. If an item does not apply, denote N/A (not applicable). If you cannot include required information in the space provided, attach additional sheets as necessary.

The Disclosure Statement form must be signed, dated, and notarized prior to submission.

## CERTIFICATIONS REGARDING LOBBYING; DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS; AND DRUG-FREE WORKPLACE REQUIREMENTS

Applicants should refer to the regulations cited below to determine the certification to which they are required to attest. Applicants should also review the instructions for certification included in the regulations before completing this form. Signature of this form provides for compliance with certification requirements under 34 CFR Part 82, "New Restrictions on Lobbying," and 34 CFR Part 85, "Government-wide Debarment and Suspension (Nonprocurement) and Government-wide Requirements for Drug-Free Workplace (Grants)." The certifications shall be treated as a material representation of fact upon which reliance will be placed when the Department of Energy determines to award the covered transaction, grant, or cooperative agreement.

#### 1. LOBBYING

The undersigned certifies, to the best of his or her knowledge and belief, that:

- No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement. Standard Form-LLL not required
- ☐ Funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement. If checked, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.

The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

#### 2. DEBARMENT, SUSPENSION, AND OTHER RE-SPONSIBILITY MATTERS

- (1) The prospective primary participant certifies to the best of its knowledge and belief, that it and its principals:
  - (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
  - (b) Have not within a three-year period receding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery,

falsification or destruction of records, making false statements, or receiving stolen property;

- (c) Are not presently indicted for or otherwise criminally or civilly charged by a government entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
- (d) Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default.
- (2) Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

#### 3. DRUG-FREE WORKPLACE

This certification is required by the Drug-Free Workplace Act of 1988 (Pub. L. 100-690, Title V, Subtitle D) and is implemented through additions to the Debarment and Suspension regulations, published in the <u>Federal Register</u> on January 31, 1989, and May 25, 1990.

#### ALTERNATE I (GRANTEES OTHER THAN INDIVIDUALS)

- The grantee certifies that it will or will continue to provide a drug-free workplace by:
  - (a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
  - (b) Establishing an ongoing drug-free awareness program to inform employees about:
    - (1) The dangers of drug abuse in the workplace;
    - The grantee's policy of maintaining a drug-free workplace;
    - (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
    - (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
  - (c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);
  - (d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will:
    - (1) Abide by the terms of the statement; and
    - (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the work-place not later than five

calendar days after such conviction.

- (e) Notifying the agency, in writing, within ten calendar days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to energy grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
- (f) Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph (d)(2), with respect to any employee who is so convicted:
- Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
- (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
- (g) Making a good faith effort to continue to maintain a drugfree workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).
- (2) The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant:

Place of Performance: (Street address, city, county, state, zip code)

Check if there are workplaces
on file that are not identified here.

#### 4. LOBBYING DISCLOSURE ACT OF 1995, SIMPSON-CRAIG AMENDMENT

Applicant organizations which are described in section 501(c)(4) of the Internal Revenue Code of 1986 and engage in lobbying activities after December 31, 1995, shall not be eligible for the receipt of Federal funds constituting an award, grant, or loan. Section 501(c)(4) of the Internal Revenue Code of 1986 covers:

Civic leagues or organizations not organized for profit but operated exclusively for the promotion of social welfare, or local associations of employees, the membership of which is limited to the employees of a designated person or persons in a particular municipality, and the net earnings of which are devoted exclusively to charitable, educational, or recreational purposes.

As set forth in the Lobbying Disclosure Act of 1995 (Public Law 104-65, December 19, 1995), as amended ["Simpson-Craig Amendment," see Section 129 of The Balanced Budget Downpayment Act, I (Public Law 104-99, January 26, 1996)], lobbying activities is defined broadly. (See section 3 of the Act.)

The undersigned certifies, to the best of his or her knowledge and belief, that: it <u>IS NOT</u> an organization described in section 501(c)(4) of the Internal Revenue Code of 1986; OR that it <u>IS</u> an organization described in section 501(c)(4) of the Internal Revenue Code of 1986, which, after December 31, 1995, <u>HAS NOT</u> engaged in any lobbying activities as defined in the Lobbying Disclosure Act of 1995, as amended.

#### ALTERNATE II (GRANTEES WHO ARE INDIVIDUALS)

- (1) The grantee certifies that, as a condition of the grant, he or she will not engage in the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substances in conducting any activity with the grant.
- (2) If convicted of a criminal drug offense resulting from a violation occurring during the conduct of any grant activity, he or she will report the conviction, in writing, within 10 calendar days of the conviction, to every grant officer or other designee, unless the Federal agency designates a central point for the receipt of such notices. When notice is made to such a central point, it shall include the identification number(s) of each affected grant.

As the duly authorized representative of the applicant, I hereby certify that the applicant will comply with the above certifications.

NAME OF APPLICANT	PR/AWARD NUMBER AND/OR PROJECT NAME	
PRINTED NAME AND TITLE OF AUTH	ORIZED REPRESENTATIVE	
SIGNATURE	DATE	

# Form W-9 (Rev. January 2003) Department of the Treasury Internal Revenue Service

# Request for Taxpayer Identification Number and Certification

Give form to the requester. Do not send to the IRS.

Print or type Specific Instructions on page 2.					
	co				
	Check appropriate box: ☐ Individual/ Sole proprietor ☐ Corporation ☐ Partnership ☐ Other ►		Exempt from backup withholding		
Print or type	Address (number, street, and apt. or suite no.)	Requester's name and	address (optional)		
pecific	City, state, and ZIP code				
See S					
Pa	art I Taxpayer Identification Number (TIN)				
page see	Enter your TIN in the appropriate box. For individuals, this is your social security number (SSN).  However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see How to get a TIN on page 3.  Note: If the account is in more than one name, see the chart on page 4 for guidelines on whose number    Social security number				
	art II Certification	†			
	der penalties of perjury, I certify that:				
	1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and				
2. I	2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and				
3. I	3. I am a U.S. person (including a U.S. resident alien).				
withl For i arrar	Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 4.)				

#### Purpose of Form

Signature of

U.S. person ▶

Sign

Here

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

**U.S. person.** Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- 1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- **3.** Claim exemption from backup withholding if you are a U.S. exempt payee.

**Note:** If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Foreign person.** If you are a foreign person, use the appropriate Form W-8 (see **Pub. 515**, Withholding of Tax on Nonresident Aliens and Foreign Entities).

#### Nonresident alien who becomes a resident alien.

Date ▶

Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the recipient has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement that specifies the following five items:

- 1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
  - 2. The treaty article addressing the income.
- **3.** The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
- **4.** The type and amount of income that qualifies for the exemption from tax.
- **5.** Sufficient facts to justify the exemption from tax under the terms of the treaty article.

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Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a **nonresident alien or a foreign entity** not subject to backup withholding, give the requester the appropriate completed Form W-8.

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 30% of such payments (29% after December 31, 2003; 28% after December 31, 2005). This is called "backup withholding." Payments that may be subject to backup withholding include interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will **not** be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

## Payments you receive will be subject to backup withholding if:

- 1. You do not furnish your TIN to the requester, or
- 2. You do not certify your TIN when required (see the Part II instructions on page 4 for details), or
- ${\bf 3.}$  The IRS tells the requester that you furnished an incorrect TIN, or
- **4.** The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
- **5.** You do not certify to the requester that you are not subject to backup withholding under **4** above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the instructions below and the separate Instructions for the Requester of Form W-9.

#### **Penalties**

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

**Criminal penalty for falsifying information.** Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

**Misuse of TINs.** If the requester discloses or uses TINs in violation of Federal law, the requester may be subject to civil and criminal penalties.

### **Specific Instructions**

#### Name

If you are an individual, you must generally enter the name shown on your social security card. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first, and then circle, the name of the person or entity whose number you entered in Part I of the form.

**Sole proprietor.** Enter your **individual** name as shown on your social security card on the "Name" line. You may enter your business, trade, or "doing business as (DBA)" name on the "Business name" line.

Limited liability company (LLC). If you are a single-member LLC (including a foreign LLC with a domestic owner) that is disregarded as an entity separate from its owner under Treasury regulations section 301.7701-3, enter the owner's name on the "Name" line. Enter the LLC's name on the "Business name" line.

Other entities. Enter your business name as shown on required Federal tax documents on the "Name" line. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on the "Business name" line.

**Note:** You are requested to check the appropriate box for your status (individual/sole proprietor, corporation, etc.).

#### Exempt From Backup Withholding

If you are exempt, enter your name as described above and check the appropriate box for your status, then check the "Exempt from backup withholding" box in the line following the business name, sign and date the form.

Generally, individuals (including sole proprietors) are not exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends.

**Note**: If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding.

**Exempt payees.** Backup withholding is **not required** on any payments made to the following payees:

- 1. An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2);
- **2.** The United States or any of its agencies or instrumentalities;
- **3.** A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities;
- **4.** A foreign government or any of its political subdivisions, agencies, or instrumentalities; or
- **5.** An international organization or any of its agencies or instrumentalities.

Other payees that may be exempt from backup withholding include:

- 6. A corporation;
- 7. A foreign central bank of issue;
- **8.** A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States;

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- **9.** A futures commission merchant registered with the Commodity Futures Trading Commission;
  - A real estate investment trust;
- 11. An entity registered at all times during the tax year under the Investment Company Act of 1940;
- 12. A common trust fund operated by a bank under section 584(a);
  - 13. A financial institution;
- **14.** A middleman known in the investment community as a nominee or custodian; or
- **15.** A trust exempt from tax under section 664 or described in section 4947.

The chart below shows types of payments that may be exempt from backup withholding. The chart applies to the exempt recipients listed above, 1 through 15.

If the payment is for	THEN the payment is exempt for
Interest and dividend payments	All exempt recipients except for 9
Broker transactions	Exempt recipients 1 through 13. Also, a person registered under the Investment Advisers Act of 1940 who regularly acts as a broker
Barter exchange transactions and patronage dividends	Exempt recipients 1 through 5
Payments over \$600 required to be reported and direct sales over \$5,000 <sup>1</sup>	Generally, exempt recipients  1 through 7 <sup>2</sup>

<sup>&</sup>lt;sup>1</sup> See Form 1099-MISC, Miscellaneous Income, and its instructions

## Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see How to get a TIN below.

If you are a **sole proprietor** and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-owner **LLC** that is disregarded as an entity separate from its owner (see **Limited liability company (LLC)** on page 2), enter your SSN (or EIN, if you have one). If the LLC is a corporation, partnership, etc., enter the entity's EIN.

**Note:** See the chart on page 4 for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local Social Security Administration office or get this form on-line at www.ssa.gov/online/ss5.html. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can get Forms W-7 and SS-4 from the IRS by calling 1-800-TAX-FORM (1-800-829-3676) or from the IRS Web Site at www.irs.gov.

If you are asked to complete Form W-9 but do not have a TIN, write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

**Note:** Writing "Applied For" means that you have already applied for a TIN **or** that you intend to apply for one soon.

**Caution:** A disregarded domestic entity that has a foreign owner must use the appropriate Form W-8.

<sup>&</sup>lt;sup>2</sup> However, the following payments made to a corporation (including gross proceeds paid to an attorney under section 6045(f), even if the attorney is a corporation) and reportable on Form 1099-MISC are **not exempt** from backup withholding: medical and health care payments, attorneys' fees; and payments for services paid by a Federal executive agency.

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#### Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if items 1, 3, and 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). Exempt recipients, see **Exempt from backup withholding** on page 2.

Signature requirements. Complete the certification as indicated in 1 through 5 below.

- 1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.
- 2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.
- **3. Real estate transactions.** You must sign the certification. You may cross out item **2** of the certification.
- 4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).
- 5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA or Archer MSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

## What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
Two or more individuals (joint account)	The actual owner of the accoun or, if combined funds, the first individual on the account <sup>1</sup>
3. Custodian account of a minor	The minor <sup>2</sup>
(Uniform Gift to Minors Act) 4. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee <sup>1</sup>
<ul> <li>b. So-called trust account that is not a legal or valid trust under state law</li> </ul>	The actual owner <sup>1</sup>
5. Sole proprietorship or single-owner LLC	The owner <sup>3</sup>
For this type of account:	Give name and EIN of:
<b>6.</b> Sole proprietorship or single-owner LLC	The owner <sup>3</sup>
7. A valid trust, estate, or pension trust	Legal entity <sup>4</sup>
8. Corporate or LLC electing corporate status on Form 8832	The corporation
<b>9.</b> Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
10. Partnership or multi-member LLC	The partnership
11. A broker or registered nominee	The broker or nominee
12. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity

<sup>&</sup>lt;sup>1</sup> List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished

**Note:** If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

#### **Privacy Act Notice**

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons who must file information returns with the IRS to report interest, dividends, and certain other income paid to you, mortgage interest you paid, the acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA or Archer MSA. The IRS uses the numbers for identification purposes and to help verify the accuracy of your tax return. The IRS may also provide this information to the Department of Justice for civil and criminal litigation, and to cities, states, and the District of Columbia to carry out their tax laws. We may also disclose this information to other countries under a tax treaty, or to Federal and state agencies to enforce Federal nontax criminal laws and to combat terrorism.

You must provide your TIN whether or not you are required to file a tax return. Payers must generally withhold 30% of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to a payer. Certain penalties may also apply.



<sup>&</sup>lt;sup>2</sup> Circle the minor's name and furnish the minor's SSN.

<sup>&</sup>lt;sup>3</sup> You must show your individual name, but you may also enter your business or "DBA" name. You may use either your SSN or EIN (if you have one).

<sup>&</sup>lt;sup>4</sup> List first and circle the name of the legal trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.)

## **IMMIGRATION STATUS**

I hereby attest that all workers on this project are either citizens of the United	I States or
are in a proper and legal immigration status that authorizes them to be emplo	yed for pay
within the United States.	